SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | | PAGE | 7 | 72 O | F | 87 |
|------------------|------------------|-----|--|-----|--|------|---|------|---|----|
| (0 | (check only one) | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | | |
| | | 13 | | 14 | | 15 | | 16 | | 17 |

| | nd Statements may not be sold or used by any person the name and address of any political committee to | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) NATIONAL RETAIL FEDERATION RETAILPAC | | | | | | | | | |
| Taylor, Colleen, , , | • | | | | | | | | |
| Mailing Address 200 Vesey St FI 33 | 12 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | | | | |
| City | State Zip Code | Transaction ID: 2174876 | | | | | | | |
| New York | NY 10285-1000 | Amount of Each Receipt this Period | | | | | | | |
| FEC ID number of contributing federal political committee. | C | 1000.00 | | | | | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | | | | | |
| American Express | President, MSUS | _ | | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 | | | | | | | |
| Primary General | 00 0 | | | | | | | | |
| Other (specify) ▼ | 1000.00 | | | | | | | | |
| Thorne, William, F, , | | | | | | | | | |
| Mailing Address 1000 New Jersey Ave SE | | M M / D D / Y Y Y Y Y | | | | | | | |
| Apt 613 | Ctoto 7:- 01- | 08 11 2021 | | | | | | | |
| City | State Zip Code DC 20003-3363 | Transaction ID : 2161722 | | | | | | | |
| Washington | DC 20003-3363 | Amount of Each Receipt this Period | | | | | | | |
| FEC ID number of contributing federal political committee. | C | 5000.00 | | | | | | | |
| Name of Employer (for Individual) National Retail Federation | Occupation (for Individual) Senior Vice President | Memo Item | | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | | | |
| Primary General Other (specify) ▼ | 5000.00 | | | | | | | | |
| Full Name of Individual (Last, First, Middle | Full Name of Individual (Last, First, Middle Initial) or Full Organization Name | | | | | | | | |
| Mailing Address | | Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period | | | | | | | |
| City | State Zip Code | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | | | | | | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | | | |
| Primary General | | | | | | | | | |
| Other (specify) | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional | 1) | 6000.00 | | | | | | | |
| | | | | | | | | | |
| TOTAL This Period (last page this line num | 34463.46 | | | | | | | | |